

Management Accountability Review

Western Regional Office

July 26th – 28th, 2011



Areas Reviewed:

Standard Operating Procedures
Strategic Business Plan
Packers & Stockyards Automated System

Executive Summary

The Packers and Stockyards Program (P&SP) Management Assessment Review Team (MART) conducted a Management Accountability Review (MAR) on July 26th through 28th, 2011, the remaining review and assessment was conducted by MART leader Regina Ware August 1 through 26th, 2011 of the following Western Regional Office (WRO) operational areas:

1. Standard Operating Procedures (SOP)
2. Strategic Business Plan (SBP) objectives
3. Packers & Stockyards Automated System (PAS)

An automated scoring module for each core process was developed and used to determine compliance with specific areas of the SOP's, SBP, and PAS that were identified as part of this MAR. For each area under review, the following scorecard was used to assess overall compliance.

GREEN	YELLOW	RED
Overall average per area between 90% to 100%; Minor improvements possible; No corrective action required; Less frequent audits required	Overall average per area between 70% and 89%; Findings, but no serious weaknesses; Corrective action required with follow-up from RD or more frequent audits	Overall average per area less than 70%; Material weakness discovered; Mandatory corrective action required with follow-up audit

Using this scorecard allowed the MART to identify those particular areas within the WRO that require attention or improvement. In some cases, the scorecard identifies changes needed for standard operating procedures. The following table depicts the WRO rating for each area reviewed. Additional details, including the overall score and findings/recommendations with supporting documents, are included in this report.

RATING	REVIEW AREA	SCORE
GREEN	RO-1: Registration and Bonding	94%
RED	RO-2: Investigations	67%
GREEN	RO-3: Regulatory Actions	92%
GREEN	RO-4: Enforcement	92%
GREEN	RO-5: Bond/Trust Claims	90%
GREEN	RO-6: Financial Instrument Termination / Expiration	94%
GREEN	RO-7: Scale Test Reports	94%
GREEN	CRU-1 Annual Reports	94%

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Introduction

The United States Department of Agriculture (USDA) Grain Inspection, Packers and Stockyards Administration (GIPSA), Management Accountability Program, requires that reviews of the Packers and Stockyards Program (P&SP) Headquarters and Regional offices be conducted. Administrative Instruction (AI-3) sets forth the components of this program to ensure compliance with P&SP policies and procedures and with OMB Circular A-123's standards for management controls.

Data was abstracted from PAS for activities completed within the third quarter. The MART Leader used the data for the initial validation, assessment, and selection of random sampling sizes. On July 26 and 27, 2011, the Management Assessment Review Team (MART) reviewed and evaluated the technical performance of the Western Regional Office (WRO). The remaining randomly selected data from PAS was assessed and evaluated by the MART leader from August 1 to 26, 2011. This MAR includes the time period of April 1st through June 30th in the following three operational areas: Standard Operating Procedures (SOPs), Strategic Business Plan (SBP) objectives, and Packers and Stockyards Automated System (PAS). The MART consisted of the following individuals:

- Regina Ware, P&SP, Headquarters PAS Administrator
- Peter Jackson, PLD, Headquarters
- Ladondra Taylor, LIE, Midwestern Regional Office
- Twala Samuels, Marketing Specialist, Eastern Regional Office
- Steve Mason, LIE, Eastern Regional Office
- Michelle Caldwell, Auditor, Midwestern Regional Office
- Patti Tolle, CRU Supervisor, Western Regional Office
- Nancy Speer, Auditor, Western Regional Office
- Bart Di Giovanni, RA, Eastern Regional Office
- Leslie Jordan, RA, Midwestern Regional Office
- Chad Curry, RA, Western Regional Office
- Will Arce, Marketing Specialist, Midwestern Regional Office

The MAR evaluated the WRO's ability to effectively and uniformly apply the rules and requirements set forth in the Department and Agency objectives and standards, policies, and PAS compliance. The MAR final report includes a summary of findings, recommendations, and supporting documentation. The findings section reflects significant items that require corrective action by the WRO and formal notification by memo to the Office of Deputy Administrator (ODA) that the item(s) were resolved, unless otherwise noted. For each finding, the recommendations section reflects the MART's suggestions for improving the performance in affected areas, some of which may not require formal notification

to the ODA. The ODA may conduct follow-up reviews to ensure that corrective action was taken for those instances that were deemed major.

Methodology

The MART developed and used standardized review forms to determine and document compliance. The review forms contain the following sections: 1) Guidance, 2) Review Plan, 3) Results, and 4) Summary. An explanation of each section can be found in [Attachment 1](#).

For each specific area of the SOP, SBP, and PAS under review, the number of instances examined was compared to the number of instances deemed compliant to determine an individual percentage. The number of instances was determined by selecting an appropriate sampling plan (either 100 percent inspection or random sampling). Most of the data was abstracted from PAS queries; however, the remaining data was abstracted from existing reports, spreadsheets, documents, and logs; all of which are documented on the review form. For this review, 100 percent verification was not possible in all areas, but the MART assures that a representative sample was sufficient for those not inspected at the 100 percent threshold. Each individual percentage was averaged to calculate an overall compliance percentage using the following scoring system:

GREEN	YELLOW	RED
Overall average per area between 90% to 100%; Minor improvements possible; No corrective action required; Less frequent audits required	Overall average per area between 70% and 89%; Findings, but no serious weaknesses; Corrective action required with follow-up from RD or more frequent audits	Overall average per area less than 70%; Material weakness discovered; Mandatory corrective action required with follow-up audit

Findings and Recommendations

RO-1: Registration and Bonding

The WRO was rated green in this area; minor findings are reported for continuous improvements. The WRO scored well in the SOP Performance and Objectives but weakest in the PAS Compliance.

RATING	REVIEW AREA	SCORE
GREEN	RO1: Registration and Bonding	94%

P&SP Management Accountability Review Form				
Section 1 - Guidance				
SOP	RO-1 Registration and Bonding			
SBP	Goal 1 - Increase level of compliance through preventive regulatory actions Objective 1 - Ensure those operating subject to the P&S Act are properly registered and/or bonded and meet reporting requirements			
Section 2 - Review Plan				
Purpose of Review	<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Periodic	Annually	<input type="checkbox"/> Follow-up
Frequency	Annually unless otherwise specified			
Sampling Plan	Random sample			
Validation	SOP(1): Review PAS to obtain entity listing that required corrections in the registration and bonding process SOP(2): Review listing from PAS to obtain entities registered within scope of review SOP(3): Review PAS for NOD documentation			
Section 3 - Results				
	Number Reviewed	Number Compliant	%	Numerical Score
SOP Performance Objectives and Compliance				
(1) Send paperwork to entity within five days of receipt for corrections	10	10	100%	
(2) Send Acceptance Letter within five days after HQ approval	10	10	100%	
(3) Send NOD with approval signature within one business day of receipt	10	10	100%	
(4) SOP Checklist	30	30	100%	
Average SOP Compliance		100%		
SBP Activity Performance Standard				
There are no Regional Office level Strategic Business Plan performance measures to be reviewed at this time				
Average SBP Compliance				
PAS Compliance (Checklist)				
PAS Checklist	40	35	88%	
Average PAS Compliance		88%		
Section 4 - Summary				
Findings / Recommendations:				
See report.				
Overall Rating:	GREEN		94%	
Persons interviewed:				
Reviewers:	2011 MAR TEAM-Peter Jackson, Twala Samuels, Leslie Jordan, Michelle Caldwell, Patti Tolle, Ladondra Taylor, Steve Mason, Nancy Speer, Bart DiGiovanni, Chad Curry, and Will Arce		Date:	July 26th and 27th

Findings

SOP Performance Objective (1): "Send paperwork to entity within five days of receipt for correction"

- A total sample size of ten was reviewed. The WRO was found to be compliant with sending paperwork to the entity within the allotted timeframe.

SOP Performance Objective (2): "Send acceptance letter within five days from receipt of registration"

- A total of ten samples were reviewed. The WRO was found to be compliant with sending an acceptance letter within the allotted timeframe.

SOP Performance Objective (3): "Send NOD with approval signature within one business day of receipt"

- A total of ten samples were reviewed. There were no instances found in which the WRO failed to send an NOD within the allotted timeframe.

SOP Checklist #1: "If new registrant, did the PSU staff send the Standard Packet and include POC information?"

- A total of ten samples were reviewed. There were no instances found in which the WRO failed to send the Standard Packet and include POC information.

SOP Checklist #2: "If amended, supplemental, reactivated, or limited, did the PSU staff send appropriate paperwork to the entity within five business days of receipt to collect the necessary information?"

- A total of ten samples were reviewed. The WRO was found to be compliant with sending the appropriate paperwork to the entity within five business days of receipt to collect necessary information.

SOP Checklist #3: "If paperwork is correct, did the PSU staff input information into PAS? Is documentation available showing appropriate letter was sent?"

- A total of ten samples were reviewed. The WRO was found to be compliant with inputting information into PAS and/or the documentation.

PAS Checklist #1: "Business entity and Address tab completed in AMS"

- A total of ten samples were reviewed. Of the ten, there were three instances found in which the WRO failed to complete entry in AMS.
 - ECM # 46497, #62907, #65335 – Incorrect address entered and/or operating address is different from application.

PAS Checklist #2: "If market agency, dealer, or packer with volume over \$500,000 is financial instrument tab complete?"

- A total of ten samples were reviewed. There were no instances found in which the WRO failed to complete the financial instrument tab.

PAS Checklist #3: "Entity paperwork included in ECM documentation folder"

- A total of ten samples were reviewed. There were no instances found in which the WRO failed to include paperwork in ECM folder.

PAS Checklist #4: "Is the file naming convention correct?"

- A total of ten samples were reviewed. Of the ten, there were two instances in which the WRO failed to name documents correctly and two instances where minor errors were made with DBA name.
 - ECM #62713, #63035, #81692, #65609 – No DBA included on document title and/or inconsistent name used for document title.

Recommendations

- The review revealed errors with address data matching the application. The WRO users should enter information in the notes if address updates are made in effort to alert all users that view the data.
- The naming convention is an issue. Employees have various interpretations of the instructions, which results in numerous variations of file names in PAS and makes it difficult to determine whether the correct file is located in the correct folder.

RO-2: Investigations

The WRO was rated red in this area which requires immediate attention since material weaknesses were found in SBP Performance; several minor findings are reported for continuous improvements in SOP Performance Objectives and PAS Compliance.

RATING	REVIEW AREA	SCORE
RED	RO-2: Investigations	67%

P&SP Management Accountability Review Form				
Section 1- Guidance				
SOP	RO-2 Investigations			
SBP	Goal 2 - Attain compliance through investigation and enforcement Objective 1 - Expedite the timely completion of investigations			
Section 2 - Review Plan				
Purpose of Review	<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Periodic	<input type="checkbox"/> Annually	<input type="checkbox"/> Follow-up
Frequency	Annually unless otherwise specified			
Sampling Plan	100% Records inspection			
Validation	SBP(1-2) and SOP(1-3): Verify case files in PAS SOP(4): Randomly sample investigative case files in PAS			
Section 3 - Checklist Results				
	Number Reviewed	Number Compliant	%	Numerical Score
SOP Performance Objectives and Compliance				
(1) Close Rapid Response within 75 calendar days of receipt of complaint/ event	N/A	N/A		
(2) Close Level 1 Priority within 160 calendar days of receipt of complaint/ event	53	46	87%	
(3) Close Level 2 Priority within 100 calendar days of receipt of complaint/ event	119	98	82%	
(4) SOP Checklist	65	57	88%	
Average SOP Compliance		86%		
SBP Activity Performance Standard				
(1) Investigation and its related Enforcement were completed within timeframes established by the SOPs	11	3	27%	
(2) Initiate Rapid Response investigation within two business days from time of complaint/event	N/A	N/A		
Average SBP Compliance		27%		
PAS Compliance (Checklist)				
PAS Checklist	50	44	88%	
Average PAS Compliance		88%		
Section 4 -Summary				
Findings / Recommendations:				
Overall Rating:	RED		67%	
Persons interviewed:				
Reviewers:	2011 MAR TEAM-Peter Jackson, Twala Samuels, Leslie Jordan, Michelle Caldwell, Patti Tolle, Ladondra Taylor, Steve Mason, Nancy Speer, Bart DiGiovanni, Chad Curry, and Will Arce		Date:	July 26th and 27th

Findings

SOP Performance Objective (1): "Close Rapid Response within 75 calendar days of receipt of complaint/ event"

- No rapid responses were completed during the review period.

SOP Performance Objective (2): "Close Level 1 Priority within 160 calendar days of receipt of complaint/ event"

- One hundred percent of the third quarter sample data was reviewed. The WRO had an 85% compliance rate for closing Level 1 Priority investigations within 160 days.

SOP Performance Objective (3): "Close Level 2 Priority within 100 calendar days of receipt of complaint/ event"

- One hundred percent of the third quarter sample data was reviewed. The WRO had an 82% compliance rate for closing Level 2 Priority investigations within 100 days.

SBP Goal 2, Objective 1, Activity 1: "Initiate Rapid Response investigation within two business days from time of complaint/ event"

- A total of three samples were reviewed. There were no instances found in which the WRO failed to initiate the Rapid Response within the allotted timeframe.

SBP Goal 2, Objective 1, Activity 1: "Investigation and its related Enforcement were completed within timeframes established by the SOPs"

- A total of 11 samples were reviewed. Of the 11, eight instances were found in which the WRO failed to complete the investigation and its related enforcement within the allotted timeframe.
 - See RO-2 Support Documentation for further details

SOP Checklist, RO-2, Step 2: "PAS accurately reflects whether claim /investigation Priority Level (L1, L2) was properly identified"

- A total of fifteen samples were reviewed. Of the fifteen, thirteen instances were found in which the WRO properly identified the claim/investigation priority.
 - ECM #83379, #47611, #47698, #46385, #65197, #56172, #68113, #81024, #65631, #47234, #65332, #65404 – Based SOP definitions should be designated as L2 and L1.

SOP Checklist, RO-2, Step 4.a: "For complaints deemed "terminated", the AMS entry is closed with an explanation in the notes file"

- A total of ten samples were reviewed. There was one instance where the WRO closed the entry without an explanation in the notes tab.
 - ECM #84619 – NOD Follow-up

SOP Checklist, RO-2, Step 6: "Investigation Sub-process Module technical content is accurate and complete and investigative findings are supported with appropriate documents and evidence."

- A total of nine samples were reviewed. All instances were found to be compliant.

SOP Checklist, RO-2, Step 7.a: “If a violation was found, did the assigned Agent fill out an Investigative Synopsis, place in the PAS folder, before submitting the folder to the Unit Supervisor?”

- A total of ten samples were reviewed. All instances were found to be compliant.

SOP Checklist, RO-2, Step 7.b: “If no violation was found, did the assigned Agent complete the Closing Summary in the Investigation Module, to report findings with documentation before closing the investigation folder in PAS?”

- A total of ten samples were reviewed. All instances were found to be compliant.

PAS Checklist, RO-2 #1: “Investigation data complete for Outcome tab and complete for Violation tab, if applicable?”

- A total of ten samples were reviewed. Of the ten, three instances were found in which the WRO failed to complete the Outcome and/or Violation tab.
 - ECM #61999, #65404, and #62278 - outcome and/or violation tabs were not completed in AMS.

PAS Checklist, RO-2 #2: “Species and Enforcement field complete?”

- A total of ten samples were reviewed. All instances were found to be compliant.

PAS Checklist, RO-2 #3: “Are Notes tab clear and easy to understand?”

- A total of ten samples were reviewed. All ten instances were found in which the WRO have clear and easy to understand notes.

PAS Checklist, RO-2 #4: “Is the file naming convention correct?”

- A total of ten samples were reviewed. Of the ten, two instances were found in which the WRO failed to use the correct naming convention.
 - ECM #47611 and #62278 – Inconsistent entity name used and some minor date formatting errors.

Recommendations

- Supervisors are not properly designating the appropriate priority level for Investigations. The definitions for the different priority levels are located in the SOP. There is definitely a discrepancy in the completion of these investigations because of incorrect priority designations. WRO only had L1 investigations for the third quarter which means that every investigation completed during this time were all high priority cases. Suggest management relook at the priority definitions or provide training in this area. Management may also want to relook at the criteria for completing L1 and L2 investigations to determine if the performance standard is too high or too low and adjust, if needed.

- The review also revealed that there is missing data on the folder for the Investigation. The Outcome and Violations tab aren't being completed by the agents consistently. Agents need to know that if no violations are found or sub-process module isn't conducted, they still need to go to the Violations tab and/ or Outcome tab enter the "No Violations" and/or "No Module Conducted."
- The naming convention is an issue. Employees have various interpretations of the instructions, which results in numerous variations of file names in PAS and makes it difficult to determine whether the correct file is located in the correct folder.
- The Regional Directors recommended that the date the Regional Director approves the NOV be used as the complete date when estimating the amount of time it takes to close the Investigation and its related Enforcement. The Deputy Administrator plans to take this into consideration for the next MAR. However, for this MAR the complete date of the Enforcement was used to calculate the time it took to close an investigation and its related Enforcement.

RO-3: Regulatory Activities

The WRO was rated green in this area; a few minor findings are reported for continuous improvements. The WRO results in this area were strongest in PAS Compliance Activity Performance and SBP Compliance.

RATING	REVIEW AREA	SCORE
GREEN	RO-3: Regulatory Activities	92%

P&SP Management Accountability Review Form				
Section 1- Guidance				
SOP	RO-3 Regulatory Activities			
SBP	Goal 1 - Increase level of compliance through preventive regulatory actions Objective 2 - Protect industry's financial interest Objective 3 - Protect Fair Business Practices (Competition/Trade)			
Section 2 - Review Plan				
Purpose of Review	<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Periodic	<input type="checkbox"/> Annually	<input type="checkbox"/> Follow-up
Frequency	Annually unless otherwise specified			
Sampling Plan	SBP(1-5): 100% Records inspection; SOP: Random sample			
Validation	SBP(1-4): Review folders and Sub Process Modules in PAS and compare to the BEAD risk rankings and random audit list			
Section 3 - Results				
	Number Reviewed	Number Compliant	%	Numerical Score
SOP Performance Objectives and Compliance				
SOP Checklist	30	26	87%	
Average SOP Compliance				
87%				
SBP Activity Performance Standard				
(1) Completed 100% of two financial audits of top ten packers (1 beef/1 hog)	N/A	N/A		
(2) Completed 100% of random sample of custodial/prompt pay/timely remittance audits at selected packers, auction markets and dealers	N/A	N/A		
(3) Completed 100% of inspection of scales, weighing trolleys, and weighing practices of sample of packing plants with static scale system that purchase in excess of 1,000 head of livestock annually on a carcass-weight basis	N/A	N/A		
(4) Completed 100% of randomly stratified (by buying stations, auction markets/poultry plants/poultry feed mills) and determine the rate of compliance	N/A	N/A		
(5) Completed 100% monitoring of the fed cattle and hog markets each week	N/A	N/A		
Average SBP Compliance				
PAS Compliance (Checklist)				
PAS Checklist	30	29	97%	
Average PAS Compliance				
97%				
Section 4 -Summary				
Findings / Recommendations:				
Overall Rating:	GREEN		92%	
Persons interviewed:				
Reviewers:	2011 MAR TEAM-Peter Jackson, Twala Samuels, Leslie Jordan, Michelle Caldwell, Patti Tolle, Ladondra Taylor, Steve Mason, Nancy Speer, Bart DiGiovanni, Chad Curry, and Will Arce		Date:	July 26th and 27th

Findings

SBP Goal 1, Objective 2, Activity 1: "Completed 100% of insolvency audits of identified high risk packers, auction markets, and dealers (10 per region by 10/10)"

- Since the MAR was conducted before the fiscal year end, no review could be done for this area.

SBP Goal 1, Objective 2, Activity 2 and 3: “Completed 100% of random sample of custodial/prompt pay audits to a 90% confidence level (by 10/10)”

- Since the MAR was conducted before the fiscal year end, no review could be done for this area.

SBP Goal 1, Objective 3, Activity 1: “Completed 100% of scale/weighing trolleys and weighing practices of every packing plant that purchase in excess of 1,000 head of livestock annually on a carcass-weight basis and determine the rate of compliance (by 10/10)”

- Since the MAR was conducted before the fiscal year end, no review could be done for this area.

SBP Goal 1, Objective 3, Activity 3: “Completed randomly stratified sample of scales and weighing inspection (dealers/auction markets/poultry plants/poultry feed mills) to a 90% level of confidence and determine the rate of compliance (by 10/10)”

- Since the MAR was conducted before the fiscal year end, no review could be done for this area.

SBP Goal 1, Objective 2, Activity 4: “Completed 100% monitoring of the fed cattle each week”

- Since the MAR was conducted before the fiscal year end, no review could be done for this area.

SOP Checklist RO-3 Step 2: “Regulatory Activity Sub-process Module technical content is accurate and complete”

- A total of ten samples were reviewed. Of the ten, three instances were found in which the WRO failed to complete the Sub-process Module for technical content.
 - ECM #72312 – TP-1 shows deficiencies but findings note no violations
 - ECM #86672 – Prior history not completed, a quick search revealed NOV issued in 2009; case prepared but closed, etc.
 - ECM # 100587 – Wrong sub-process module used.

SOP Checklist RO-3 Step 4: “Did the assigned Agent complete the Exit Conference and Findings tab and denote any recommendations in the Regulatory Sub-process Module before submitting the folder to the Unit Supervisor?”

- A total of ten samples were reviewed. Of the ten, one instance was found in which the WRO failed to complete Exit Conference and Findings tab and/or did not denote recommendation in the Regulatory Sub-process Module before submitting the folder to the Unit Supervisor.
 - ECM #86672 – Response/Exit conference field blank

SOP Checklist RO-3 Step 4.b: “If no violation is found, did the assigned Agent denote the findings in PAS and close the Regulatory Activity folder?”

- A total of ten samples were reviewed. All instances were found to be compliant.

PAS Checklist RO-3 #1: “Completed Species tabs and Sub-process module included in documents”

- A total of ten samples were reviewed. All instances were found to be compliant.

PAS Checklist RO-3 #2: “Completed Close Reason and Outcome and if applicable, the Violation tab”

- A total of ten samples were reviewed. All ten instances were found to be compliant.

PAS Checklist RO-3 #2: “Is the file naming convention correct?”

- A total of ten samples were reviewed. Of the ten, one instance was found in which the WRO failed to use the correct naming convention.
 - ECM # 80325 – A generic title was given to document.

Recommendations

- Prior to finalizing a Sub-processes Module, the Excel Workbook should check to see if the Exit Interview was completed. This could be a simple routine to see if the agent entered any information in the Exit Interview section. If the field is blank, Excel will prompt the agent to complete before finalizing.
- The naming convention is an issue. Employees have various interpretations of the instructions, which results in numerous variations of file names in PAS and makes it difficult to determine whether the correct file is located in the correct folder.
- There seems to be a need for training on what data must be entered on the folder. A number of folders are missing an entry for violations. The agents are entering the violations on the note tab, but should enter the violation on the violations tab. There’s an option for No Violations, so it must be entered for data accuracy.

RO-4: Enforcement

The WRO obtained a green rating, performing strong in both SOP compliance and PAS compliance.

RATING	REVIEW AREA	SCORE
GREEN	RO-4: Enforcement	92%

The lack of attention and necessary corrective action in this area could cause potential harm to the industry in which P&SP is charged to protect.

P&SP Management Accountability Review Form				
Section 1- Guidance				
SOP	RO-4 Enforcement			
SBP	N/A			
Section 2 - Review Plan				
Purpose of Review	<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Periodic	<input type="checkbox"/> Annually	<input type="checkbox"/> Follow-up
Frequency	Annually unless otherwise specified			
Sampling Plan	Random sampling and records review			
Validation	SOP(1): Review PAS for NOV documentation			
Section 3 - Results				
	Number Reviewed	Number Compliant	%	Numerical Score
SOP Performance Objectives and Compliance				
(1) Send Notice of Violation with approval signature within one business day of receipt of task	10	10	100%	
(2) SOP Checklist	58	47	81%	
Average SOP Compliance	91%			
SBP Activity Performance Standard				
N/A				
Average SBP Compliance				
PAS Compliance (Checklist)				
PAS Checklist	40	37	93%	
Average PAS Compliance	93%			
Section 4 -Summary				
Findings / Recommendations:				
See report.				
Overall Rating:	GREEN			92%
Persons interviewed:				
Reviewers:	2011 MAR TEAM-Peter Jackson, Twala Samuels, Leslie Jordan, Michelle Caldwell, Patti Tolle, Ladondra Taylor, Steve Mason, Nancy Speer, Bart DiGiovanni, Chad Curry, and Will Arce		Date:	July 26th and 27th

Findings

SOP Performance Objective (1): "Send Notice of Violation with approval signature within one business day of receipt"

- A total of ten samples were reviewed. All ten instances were found to be compliant.

SOP Checklist #1 RO-4 Step 1: "All Enforcement activities completed within 20 days of approved investigative report"

- One hundred percent of samples were reviewed. Of the 48 Enforcements completed for the third quarter, 11 instances were found in which the WRO failed to complete all enforcement activities within 20 days of approved investigative report.
 - See supporting documents for further details.

PAS Checklist #1 RO-4: "If formal file, has the case file been added to the enforcement folder as one document before forwarding to Headquarters?"

- A total of ten samples were reviewed. All instances were found to be compliant.

PAS Checklist #2 RO-4: "If NOV Enforcement, does the folder contains actual NOV document?"

- A total of ten samples were reviewed. Of the ten, one instance was found where WRO failed to add the actual NOV document to folder.
 - ECM # 93687 – No signed PDF NOV in folder.

PAS Checklist #3 RO-4: "Is the document type correct?"

- A total of ten samples were reviewed. All ten instances were found to be compliant.

PAS Checklist #4 RO-4: "Has GIPSA (Supervisor or Regional Director) official signed the NOV document?"

- A total of ten samples were reviewed. Of the ten, one instance was found in which the WRO failed to obtain the official signature of the NOV.
 - ECM #93687 – no official signature was obtained on the NOV

PAS Checklist #5RO-4: "Is the file naming convention correct?"

- A total of ten samples were reviewed. All ten instances were found to be compliant.

Recommendations

- Based on the SOP, Enforcements should be completed within 20 days of completed investigation. On average WRO completes Enforcement Activities within 23 days. Maybe consideration should be taken for increasing the number of days to complete Enforcement.
- The naming convention is an issue. Employees have various interpretations of the instructions, which results in numerous variations of file names in PAS and makes it difficult to determine whether the correct file is located in the correct folder.

RO-5: Bond/Trust Claim

The WRO was rated green in this area. The WRO results in this area were strong in SBP Activity Performance but weakest in both SOP Performance and PAS Compliance.

RATING	REVIEW AREA	SCORE
GREEN	RO-5: Bond/Trust Claims	90%

P&SP Management Accountability Review Form				
Section 1- Guidance				
SOP	RO-5 Bond/Trust Claims			
SBP	Goal 2 - Attain compliance through investigation and enforcement Objective 1 - Expedite the timely completion of investigations			
Section 2 - Review Plan				
Purpose of Review	<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Periodic	Annually	<input type="checkbox"/> Follow-up	
Frequency	Annually unless otherwise specified			
Sampling Plan	Random sampling and records review			
Validation	SBP(1) and SOP(1): Verify bond claim files in PAS			
Section 3 - Results				
	Number Reviewed	Number Compliant	%	Numerical Score
SOP Performance Objectives and Compliance				
(1) Send Certified Bond/Trust Letter with approval signature within one business day of receipt to Surety or Trustee	1	1	100%	
(2) SOP Checklist	4	3	75%	
Average SOP Compliance	88%			
SBP Activity Performance Standard				
(1) 100% of Bond and trust claim forms are forwarded to known unpaid sellers within 10 business days.	2	2	100%	
Average SBP Compliance	100%			
PAS Compliance (Checklist)				
PAS Checklist	6	5	83%	
Average PAS Compliance	83%			
Findings / Recommendations:				
Overall Rating: GREEN 90%				
Persons interviewed:				
Reviewers:	2011 MAR TEAM-Peter Jackson, Twala Samuels, Leslie Jordan, Michelle Caldwell, Patti Tolle, Ladondra Taylor, Steve Mason, Nancy Speer, Bart DiGiovanni, Chad Curry, and Will Arce		Date:	July 26th and 27th

Findings

SOP Performance Objective (1): "Send Certified Bond/Trust Letter with approval signature within one business day of receipt to Surety or Trustee"

- A total of one instance was reviewed and deemed to be compliant.

SBP Goal 2, Objective 1, Activity 1: "100% of Bond and trust claim forms are forwarded to unpaid sellers within 10 business days"

- A total of two were reviewed. Of the two, all instances were found to be compliant. However, there was difficulty trying to track the claims because of lack of information or missing information. Although the claims were timely, the region didn't schedule a review until 11 days after they were notified.

SOP Checklist, RO5 Step 4.a: "For claims received, did the PSU stamp the claim form with date of receipt?"

- A total of two were reviewed. All instances were found to be compliant.

SOP Checklist, RO5 Step 4.b: "The Claims Spreadsheet is updated to accurately reflect receipt of claims within appropriate timeframes (60, 30 or 15 days)"

- A total of two reviewed. Of the two, one instance was found in which the WRO failed to update the Claims Spreadsheet to accurately reflect receipt of claims within appropriate time frames.
 - ECM # 88057 – No claims analysis in folder to determine timeliness.

PAS Checklist #1: "For bond claims, was claim analysis attached?"

- A total of two were reviewed. Of the two, one instance was found in which the WRO failed to attach the bond claims analysis spreadsheet in ECM.
 - ECM # 88057 – No claims analysis in folder

PAS Checklist #2: "Was starting and primary factor identified?"

- A total of two were reviewed. All instances were found to be compliant.

PAS Checklist #3: "Is the file naming convention correct?"

- A total of two were reviewed. All instances were found to be compliant.

Recommendations

- There needs to be consistency on how bond claims are entered in the system across regions and each incident. No two folders are alike. Some guidelines on how to conduct bond claims will help with being able to properly assess how the process is performed.
- Until this process can be included in PAS, suggest using the claim spreadsheet to establish clear traceability of claims, whether valid or not. This will serve as supporting documentation in all bond claim files to verify all dates mailed in case a trustee needs to view the original source of compliant and for verification that claims were sent within the allotted time.

- Clarify with employees, the correct manner in which bond claims should be entered into PAS, to avoid incorrect data entry. Either claim should be entered as an Investigation by the registrant the claim is against or the claimants.

RO-6: Financial Instrument Termination / Expiration

The WRO obtained a green rating. The WRO scored higher for PAS Compliance than SOP Performance Objectives.

RATING	REVIEW AREA	SCORE
GREEN	RO-6: Financial Instrument Termination / Expiration	94%

P&SP Management Accountability Review Form				
Section 1 - Guidance				
SOP	RO-6 Financial Instrument Termination / Expiration			
SBP	N/A			
Section 2 - Review Plan				
Purpose of Review	<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Periodic	Annually	<input type="checkbox"/> Follow-up
Frequency	Annually unless otherwise specified			
Sampling Plan	100% Record inspection			
Validation	SBP(1): Review PAS			
Section 3 - Results				
	Number Reviewed	Number Compliant	%	Numerical Score
SOP Performance Objectives and Compliance				
(1) Paperwork sent to entity within 5 business days of receipt for corrections	4	4	100%	
(2) SOP Checklist	20	18	90%	
Average SOP Compliance	90%			3
SBP Activity Performance Standard				
N/A				
Average SBP Compliance				
PAS Compliance (Checklist)				
PAS Checklist	40	39	98%	
Average PAS Compliance	98%			4
Section 4 - Summary				
Findings / Recommendations:				
Overall Rating:	GREEN			94%
Persons interviewed:				
Reviewers:	2011 MAR TEAM-Peter Jackson, Twala Samuels, Leslie Jordan, Michelle Caldwell, Patti Tolle, Ladondra Taylor, Steve Mason, Nancy Speer, Bart DiGiovanni, Chad Curry, and Will Arce		Date:	July 26th and 27th

Findings

SOP Performance Objective (1): "Paperwork sent to entity within 5 business days of receipt for corrections"

- A total of four samples were reviewed. All instances were found to be compliant.

SOP Checklist RO6 Step 1: "For Bond/TA/TFA, did the PSU enter the termination date in PAS?"

- A total of ten samples were reviewed. Of the ten, four instances were compliant and one instance was found in which the WRO failed to enter the termination date in PAS. There were five instances that were not applicable.
 - ECM # 62713 – wrong termination date entered in PAS

SOP Checklist RO-6 Step 2: "Does certified letters for financial instrument termination/expiration include Statement of Operations with PSU AO/ and/or Assistant AO signature?"

- A total of ten samples were reviewed. There were two ten instances where the WRO failed to include statement of operations.
 - ECM # 65418 – no statement of ops.
 - ECM # 88477 – Statement of ops not required.

PAS RO6 Checklist #1: "Financial instrument type was properly identified in ECM?"

- A total of ten samples were reviewed. All instances were found to be compliant.

PAS RO6 Checklist #2: "Financial instrument amount entered in ECM?"

- A total of ten samples were reviewed. All instances were found to be compliant.

PAS RO6 Checklist #3: "Financial instrument termination date was properly entered in ECM?"

- A total of ten samples were reviewed. All instances were found to be compliant.

PAS RO6 Checklist #4: "Is the file naming convention correct?"

- A total of ten samples were reviewed. Of the ten, one instance was found in which the WRO failed to use the correct naming convention.
 - ECM #65418 – Folder contained an AR for Carthage Livestock.

Recommendations

- Consider enhancing data validation that will require the agent to complete the Termination Date field in PAS prior to closing the folder. This could be a simple check to see if the termination date field has been populated. If not, PAS could prompt the user to complete the field prior to closing the folder.
- Consider enhancing data validation that will require the agent to complete the financial instrument type, amount, and date in PAS prior to closing the

folder. This could be a simple check to see if these fields have been populated in the database. If not, PAS will prompt the user to complete the field prior to closing the folder.

- The naming convention is an issue. Employees have various interpretations of the instructions, which results in numerous variations of file names in PAS and makes it difficult to determine whether the correct file is located in the correct folder.

RO-7: Scale Test Reports

The WRO obtained a yellow rating; which requires immediate attention in this area. The WRO results in this area were stronger in PAS Compliance, but several material weaknesses were found in SOP Performance Objectives.

RATING	REVIEW AREA	SCORE
YELLOW	RO-7: Scale Test Reports	86%

The lack of attention and necessary corrective action in this area could cause potential harm to the industry in which P&SP is charged to protect.

P&SP Management Accountability Review Form				
Section 1- Guidance				
SOP	RO-7 Scale Test Report			
SBP	Goal 1 - Increase level of compliance through preventive regulatory actions Objective 3 - Protect Fair Business Practices (Competition/Trade)			
Section 2 - Review Plan				
Purpose of Review	<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Periodic	Annually	<input type="checkbox"/> Follow-up
Frequency	Annually unless otherwise specified			
Sampling Plan	Random sample			
Validation	Review and verify Scale Test records in PAS			
Section 3 - Results				
	Number Reviewed	Number Compliant	%	Numerical Score
SOP Performance Objectives and Compliance				
(1) Send Notification of Default (SW2) with approval signature within ten business day of discovering report is late	14	14	100%	
(2) BPU initiated Enforcement folder to issue Notification of Violation (SW3) within one business day of determining report inaccurate	5	0	0%	
(3) Enter test date in PAS within ten business days of receipt	10	10	100%	
(4) SOP Checklist	25	22	88%	
Average SOP Compliance	72%			
SBP Activity Performance Standard				
There are no Regional Office level Strategic Business Plan performance measures to be reviewed at this time				
Average SBP Compliance				
PAS Compliance (Checklist)				
PAS Checklist	20	20	100%	
Average PAS Compliance	100%			
Section 4 -Summary				
Findings / Recommendations:				
Overall Rating:	YELLOW		86%	
Persons interviewed:				
Reviewers:	2011 MAR TEAM-Peter Jackson, Twala Samuels, Leslie Jordan, Michelle Caldwell, Patti Tolle, Ladondra Taylor, Steve Mason, Nancy Speer, Bart DiGiovanni, Chad Curry, and Will Arce		Date:	July 26th and 27th

Findings

SOP Performance Objective (1): “Send Notification of Default (SW2) with approval signature within one business day of discovering the report is late”

- A total of twenty-four samples were reviewed. Of the twenty-four, fourteen instances were found to be compliant and applicable.
 - For details see RO7 Supporting Documentation.

SOP Performance Objective (2): “If inaccurate, send Notification of Violation (SW3) with approval signature through Enforcement process”

- A total of five samples were reviewed. Of the five, three instances were found where WRO failed to initiate an Enforcement process for inaccurate test results.
 - Scale Serial# E8847, G094498PL, and E31205-0033 – each had an inaccurate test, but no corresponding Enforcement folder initiated.

SOP Performance Objective #3: “Enter test date in PAS within ten business days of receipt”

- A total of ten samples were reviewed. All ten instances were found in which the WRO entered the test date in PAS within ten business days of receipt.

SOP Checklist RO-7 Step 1: “Scales subject to P&SP jurisdiction require test and reporting at least at least once from Jan.-June and once from July-Nov - check all dates in sample for compliance”

- A total of ten samples were reviewed. All ten instances were found to be compliant.

SOP Checklist RO-7 Step 5: “Did the BPU review the report to determine accuracy within ten business days of receipt?”

- A total of ten were reviewed. All ten instances were found to be compliant.

PAS Checklist RO7 #1: “Data accurately entered into AMS (Scale Serial Number, Type, and Status)?”

- A total of ten were reviewed. All ten instances were found to be compliant.

PAS Checklist RO7 #2: “Is the scale test report on file for entity?”

- A total of ten samples were reviewed. All ten instances were found to be compliant.

Recommendations

- There’s a big improvement from last year’s review score and this year’s score. In the future, this process will be tracked in PAS. Therefore, data will be retrieved easily from the data warehouse.

It seems that if a scale test is deemed inaccurate, an NOV isn’t necessarily issued. There needs to be consistency on why an NOV isn’t issued for inaccurate test.

CRU-1: Annual Report

The CRU results in this area were strongest in SOP Performance Objectives and weakest in SBP Activity.

RATING	REVIEW AREA	SCORE
GREEN	CRU-1: Annual Reports	94%

P&SP Management Accountability Review Form				
Section 1- Guidance				
SOP	CRU-1 Annual Report (AR)			
SBP	Goal 1 - Increase level of compliance through preventive regulatory actions Objective 1 - Ensure those operating subject to the P&S Act are properly registered and/or bonded and meet reporting requirements			
Section 2 - Review Plan				
Purpose of Review	<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Periodic	<input type="checkbox"/> Annually	<input type="checkbox"/> Follow-up
Frequency	Annually unless otherwise specified			
Sampling Plan	Random sample			
Validation	SBP(1): Review PAS for NOD documentation SOP(1): Randomly sample ARs for compliance			
Section 3 - Results				
	Number Reviewed	Number Compliant	%	Numerical Score
SOP Performance Objectives and Compliance				
(1) If AR has not been received, the CRU staff generates and sends traceable NOD within 10 business days after due date.	10	10	100%	
(2) If AR is unacceptable, the CRU staff generates and sends traceable NOD within 10 business days receipt.	15	15	100%	
(3) SOP Checklist	30	29	97%	
Average SOP Compliance	99%			
SBP Activity Performance Standard				
(1) Measure the percent of timely ARs based on the number of ARs received	1,880	1,229	65%	
Average SBP Compliance	65%			
PAS Compliance (Checklist)				
PAS Checklist	80	72	90%	
Average PAS Compliance	90%			
Section 4 - Summary				
Findings / Recommendations:				
Overall Rating:	GREEN		94%	
Persons interviewed:				
Reviewers:	2011 MAR TEAM-Peter Jackson, Twala Samuels, Leslie Jordan, Michelle Caldwell, Patti Tolle, Ladondra Taylor, Steve Mason, Nancy Speer, Bart DiGiovanni, Chad Curry, and Will Arce		Date:	July 26th and 27th

Findings

SOP Performance Objective (1): “If AR has not been received, the CRU staff generates and sends traceable NOD within 10 business days after due date.”

- A total of fifteen samples were reviewed. All fifteen instances were found to be compliant.

SOP Performance Objective (2): “If AR is unacceptable, the CRU staff generates and sends traceable NOD within 10 business days of receipt.”

- A total of fifteen samples were reviewed. All fifteen instances were found to be compliant.

SBP Goal1, Objective 1, Activity 1: “Measure the percent of timely ARs based on the number of default letters”

- A total of 1,880 samples were reviewed. At the time of MAR, the CRU had a compliance rate of 65% for timely reports.

SOP Checklist CRU Step 10.b: “If registration changes occurred, did the CRU staff send request to the applicable RO to update information or initiate request for new or amended registration (RO-1)?”

- A total of fifteen samples were reviewed. Of the fifteen, one instance was found in which the CRU failed to send requests to the applicable RO to update information or initiate request for new or amended registration.
 - ECM #60285 – Entity changed from partnership to an individual but no folder was created.

SOP Checklist CRU Step 10.c: “If deficiencies are found, the CRU initiates Regulatory Activity to corresponding RO”

- A total of fifteen samples were reviewed. All fifteen instances were found to be compliant.

PAS Checklist CRU #1: “For Markets and Dealers type, amount, and head were entered correctly”

- A total of thirty samples were reviewed. All fifteen instances were found to be compliant.

PAS Checklist CRU #2: “For Poultry, contract type, number of contracts, and head were entered correctly”

- A total of twenty samples were reviewed. Of the twenty, only one instance was found in which the WRO failed to enter the contract type, number of contracts, and head for Poultry correctly.
 - ECM 57976 – On Annual Report shows 0 number of contracts but AMS shows 6 entered.

PAS Checklist CRU #3: "If Annual Report is delinquent, is the green card in folder and correct certified number entered?"

- A total of fifteen samples were reviewed. Of the fifteen, there were six instances found to be non-compliant.
 - ECM #57988, #58131, #58802, #59057, #59606, and #61439 – All appear to have no copy of delivery receipt in folder.

PAS Checklist CRU #4: "Is the file naming convention correct?"

- A total of fifteen samples were reviewed. Of the fifteen, there's one instance in which the WRO failed to use the correct naming convention.
 - ECM #60037 – two documents named Ereman are included in folder.

Recommendations

- Once the Regulatory Activity is initiated, it appears that the control number changes which makes the audit trail difficult to follow. Recommend developing work instructions on a consistent process.
- The naming convention is an issue. Employees have various interpretations of the instructions, which results in numerous variations of file names in PAS and makes it difficult to determine whether the correct file is located in the correct folder.

Attachment 1: Review Form

Section 1. Guidance	Strategic Business Plan (SBP) Objective Guidance and Direction (2010-2011) dated September 7, 2010	Enter the SBP number and description.
	Standard Operating Procedure (SOP)	Enter the SOP number, title, and process step number, if appropriate.
Section 2. Review Plan	Purpose of Review	Initial, Periodic (Annual, Quarterly, Monthly) or Follow-up
	Frequency	Recommend starting with long frequency (annual) then reduce if review results warrant.
	Sampling Plan	Either 100% inspection or draw random sample of total instances. Describe sampling method (example: selected every third case opened during the performance period)
	Validation	Describe the method or procedure used to validate answers provided during the review (examples: records review, PSAS data, or other data collection system).
Section 3. Results	SOP Performance Objectives	Document the number of instances reviewed and number and percent compliant.
	SOP Checklist	Apply checklist to each instance reviewed. Calculate % compliant (total "Y"s divided by total number reviewed)
	SBP Activity Performance Standard	Document the number of instances reviewed and number and percent compliant.
	PSAS Checklist	Use the same method as SOP checklist.
Section 4. Summary	Findings	Summarize results of checklist and Performance Standard comments should include: description of any non-compliant findings; explanation of risk, if corrective action is not taken; and a firm, realistic date for completing corrective actions and re-evaluation, if necessary. Justify rating by relating discrepancies to SBP objective, performance standards, and any relevant verbiage from SOP. Discuss findings with RO for feedback.
	Recommendations	Every finding should include a recommendation for corrective action.
	Rating	Discovery of any Material Weakness can be grounds for Failure. For purposes of this review, a material weakness is defined as "A serious reportable condition in which the design or operation of one or more of the internal control structure elements (including management controls) does not reduce to a relatively low level the risk that errors or irregularities, in amounts that would be material in relation to the financial statements or schedules, would not be prevented or detected."

Attachment 2: Checklists

Standardized Operating Procedures (SOP)				
RO-1 Step 2.a	If new registrant, did the PSU staff send the Standard Packet and include POC information?	7		3 No Notes indicating why package wasn't sent.
RO-1 Step 2.b	If amended, supplemental, re-registration, or limited, did the PSU staff send appropriate paperwork to the entity within five business days of receipt to collect the necessary information?	10		
RO-1 Step 4.a	If paperwork is correct, did the PSU staff input information into PAS? Is documentation available showing appropriate letter was sent?	10		
		27	0	3
RO-2 Step 2	Reflects whether investigation Priority Level (L1, L2) was properly identified	3	7	5 The system generated investigations are being designated with priority level 1 which does not follow the SOP guidelines.
RO-2 Step 4.a	For complaints deemed "terminated", the folder entry is closed with an explanation in the notes file	9	1	
RO-2 Step 6	Investigation Subprocess Module technical content is accurate and complete and investigative findings are supported with appropriate documents and evidence.	10		Didn't complete the A/R section of Background but technical content is fine.
RO-2 Step 7.a	If a violation was found, did the assigned Agent complete an Investigative Synopsis and place in the PAS folder?	10		6 Violations were identified within the investigative report
RO-2 Step 7.b	If no violation was found, did the assigned Agent complete the Closing Summary in the Investigation Module, to report findings with documentation before closing the investigation folder in PAS?	10		4
		42	8	15
RO-3 Step 2	Regulatory Activity Subprocess Module technical content is accurate and complete	7	3	Wrong Subprocess used, prior history not completed, missing last A/R, type of org, and etc.
RO-3 Step 4	Did the assigned Agent complete the Exit Conference and Findings tab and denote any recommendations in the Regulatory Subprocess Module before submitting the folder to the Unit Supervisor?	9	1	Response/Exit conference blank
RO-3 Step 4.b	If no violation is found, did the assigned Agent denote the findings in PSAS and close the Regulatory Activity folder?	10		
		26	4	0
RO-4	Enforcement activity completed within 20 days?	37	11	
RO-4 Step 1.b	If formal file, has the case file been added to the enforcement folder as one document before forwarding to Headquarters?	10		
		47	11	0
RO-5 Step 4.a	For claims received, did the PSU stamp the claim form with date of receipt?	2		
RO-5 step 4.b	For claims not received, did the PSU update the Claims Spreadsheet to accurately reflect receipt of claims within appropriate time frames (60, 30 or 15 days)?	1	1	NO Claims Spreadsheet
		3	1	0
RO-6 Step 1	For Bond/TA/TFA, did the PSU enter the termination date in PSAS (30 days after date notice was received in office or later date if specified in notice)?	4	1	5 wrong term date
RO-6 Step 2	Does certified letters for financial instrument termination/expiration include Statement of Operations with PSU AO and/or Assistant AO signature?	8	1	1 No statement of ops
		12	2	6
RO-7 Step 1	Scales subject to P&SP jurisdiction require test and reporting at least once from Jan.-June	10		
RO-7 Step 5	Did the BPU review the report to determine accuracy within 10 business days of receipt?	10		
RO-7 Step 5.b	If inaccurate and rejected, was an SW3 letter (NOV) sent through Enforcement folder?	2		
		22	0	0
CRU-1 Step 10.b	If registration changes occurred, did the CRU staff send request to the applicable RO to update information or initiate request for new or amended registration (RO-1)?		1	14 Org Type changed but no Registration folder generated
CRU-1 Step 10.c	If deficiencies are found, the CRU initiates Regulatory Activity to corresponding RO	15		
		15	1	14

Packers and Stockyard Automated System (PAS)					
		Y	N	N/A	Comments
RO-1	Business entity and Address tab completed in AMS	7	3		
RO-1	If market agency, dealer, or packer with volume over \$500,000, is financial instrument tab complete?	10			
RO-1 Step 3.a	Entity paperwork included in ECM folder	10			Folder 67195 included great notes about stipulation.
RO-1	Is the file naming convention correct?	8	2		DBA not used for name
		35	5	0	
RO-2	Investigation data complete for Outcome tab (location, review date, close reason)?	10			
RO-2	Is the Violation tab complete?	7	3		Violations Not Completed
RO-2	Species and Enforcement field complete?	10			No Starting Factor entered
RO-2	Are Notes tab clear and easy to understand?	9	1		Notes contain personal opinion and is unprofessional.
RO-2	Is the file naming convention correct?	8	2		Inconsistent format used for entity name and date. Date should be mm-xxxx
		44	6	0	
RO-3	Completed Species and Enforcement tabs, Subprocess module included in documents tab	10			
RO-3	Completed Outcome and Violation tabs - if applicable	10			
RO-3	Is the file naming convention correct?	9	1		generic name used.
		29	1	0	
RO-4	If NOV Enforcement, does the folder contains actual NOV document?	10			
RO-4	Is the document type, certified # and date of violation correct for the NOV?	8	2		Alleged violation not listed; final copy of NOV not in folder
RO-4	Has GIPSA (Supervisor or Regional Director) official signed the NOV document?	9	1		No signed NOV in folder
RO-4	Is the file naming convention correct?	10			
		37	3	0	
RO-5	For bond claims, was claim analysis added to PAS folder?	1	1		No Analysis in file
RO-5	Was starting and primary factor identified?	2			
RO-5	Is the file naming convention correct?	2			
		5	1	0	
RO-6	Financial instrument type was properly identified in ECM?	10			
RO-6	Financial instrument amount entered in ECM?	10			AR in folder that doesn't belong
RO-6	Financial instrument termination date was properly entered in ECM?	10			
RO-6	Is the file naming convention correct?	9	1		Folder contained AR for another entity
		39	1	0	
RO-7	Data accurately entered into AMS (Scale Serial Number, Type, Status)?	10			
RO-7	Is the scale test report on file for entity?	10			
		20	0	0	
CRU-1	For Markets and Dealers type amount, and head were entered correctly	30			
CRU-1	For Poultry, contract type, number of contracts, and head were entered correctly	19	1		AR shows 0 contracts but 6 entered into AMS
CRU-1	If AR is delinquent, is the green card in folder and correct Certified number entered?	9	6		
CRU-1	Is the file naming convention correct?	14	1		C.E. Cattle, 2 docs named Ereman
		72	8	0	

Attachment 3: ***Supporting Documents***